

DEC. 21, 1901.

NEW INSTRUMENTS.

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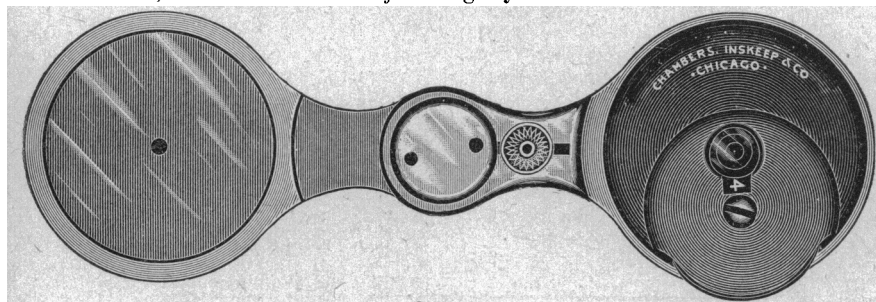
New Instruments.

A NEW OPHTHALMOSCOPE,
COMBINED WITH WHICH THERE IS A PLANE MIRROR FOR
RETINOSCOPY; INTENDED AS A POCKET INSTRUMENT
FOR OPHTHALMOLOGISTS AND PRACTITIONERS.

BROWN PUSEY, M.D.

LATE HOUSE SURGEON, NEW YORK EYE AND EAR INFIRMARY.
CHICAGO.

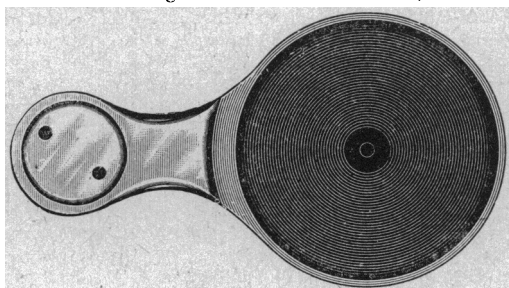
This instrument is offered primarily to meet the demand for an ophthalmoscope that can be carried conveniently in one's pocket without a box or case. It consists of a frame with two arms, which swing on a hinge-joint. The arms carry two mirrors, which are so placed that when the instrument is closed, the mirrors lie face to face, and are thus protected from injury and dirt. When the instrument is open one arm acts as a handle for the other. In the joint there is a spring bolt, which fastens the joint tightly when the mirrors lie



Open.

face to face, and also locks the joint when the instrument is open; this spring bolt is loosened by pressing a little knob. The arms are nickel-plated; on the outside this plating has a high polish, on the inside it has a dull finish, so that this metal part will not reflect light. The parts which form the backs of the mirrors are lacquered black.

The mirrors are circular, with a diameter of 1 3/16 inches; the concave mirror has a focal length of 11 inches. Back of the concave mirror, a wheel is placed in which there are five lenses, a +2 D., a +4 D., for use in making examinations by the indirect method, a +8 D. for use in examining on levels in front of the retina, a -3 D. for the unskilled user, who accommodates when making a direct examination, and a -10 D.



Closed.

for examining myopes; there is also a hole in the wheel. The silvering of the mirrors at the center is removed in a circular space of 3/32 of an inch in diameter; this arrangement was observed particularly because of the advantages offered by such mirrors for retinoscopy.

The completeness of the instrument will suggest itself. It is not a refracting ophthalmoscope with its many combinations of lenses, and, indeed, who in the present day of accurate refraction wants a refracting ophthalmoscope? The instrument is not intended to take the place in the ophthalmologist's office of his Morton. It is so compact that it weighs less than two ounces; it is 1/4 inches thick, 2 3/8 inches long when closed. It is solid, substantial and of neat finish, and can be sold at a very low price—an advantage which will be particularly considered by students.

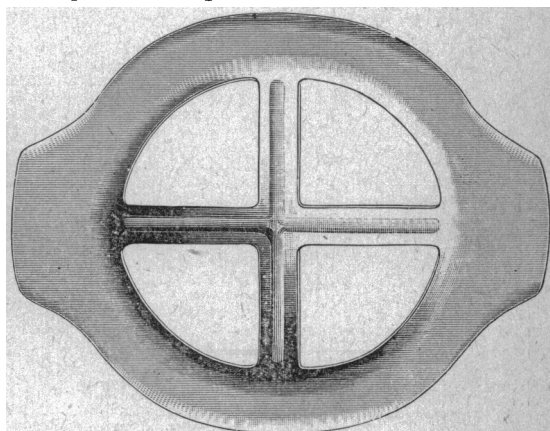
VACCINATION SHIELD.

C. P. FRANKLIN, M.D.

PHILADELPHIA.

After repeated and increasing trouble with irritated, inflamed and infected arms due to the existing forms of vaccination shield, the idea of what a vaccination shield should be has, during the course of the last ten thousand vaccinations, been gradually evolved, until the form described below, and shown in the illustration has been reached, and the writer feels that he has produced a shield which will meet all the conditions properly imposed upon such an important accessory to a perfect vaccination. A shield may be a source of comfort, protection and satisfaction, or it may be productive of distress, irritation and even infection if not suitable. The objections urged against the present forms in use have been obviated in that described below.

The shield is made of aluminum, 6 centimeters in diameter to the outer edge of its flange, which latter is curved so that



it presents no sharp edges but a broad smooth surface to the arm, and is extended at each end into a tab or projection by which it is fastened to the arm with short, narrow strips of plaster. The central part, or dome, is 4.5 centimeters in diameter, and is raised above its base one centimeter, being composed of two ribs, crossing at right angles, each rib being strengthened by a beading or groove, so that it will stand any ordinary pressure. The advantages of this shield are: lightness and durability; adaptability, as being of annealed metal it can be readily curved to fit the contour of the part vaccinated; cleanliness, as it can be washed and sterilized as often as necessary; non-irritating, as, owing to its large openings and air spaces, it does not confine the wound, and is accessible for inspection without disturbing it.

Association News.

The Committee on National Legislation.

The Committee on National Legislation has sent the following communications to the secretaries of the different State Medical Societies and hereby requests any such secretary who fails to receive his notice, to communicate at once with the Committee, through its chairman, H. L. E. Johnson, M.D., Washington, D. C.

WASHINGTON, D. C., Dec. 2, 1901.

My Dear Doctor:—On behalf of the Committee on National Legislation of the American Medical Association, I earnestly request you to send at your earliest opportunity the names and addresses of the delegate and alternate who are to represent your State Medical Society at the Third Annual Conference at Washington, D. C., this winter.

When you furnish me their names, I will notify them and you of the date of the proposed conference. Please refer to the Second Annual Report of this Committee and the minutes of the Second Annual Conference which appear in THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION of June 8, 1901, on pages 1635 and 1636, respectively.

Please acknowledge the receipt of this communication and thereby facilitate the work of this Committee, and greatly oblige.

Yours very truly, H. L. E. JOHNSON, M.D., Chairman.

WASHINGTON, D. C., Dec. 2, 1901.

My Dear Doctor:—At the meeting of the Second Annual Conference of the Committee of the American Medical Association on National Legislation, with the delegates from the various State